



FairPoint Communications
1 Davis Farm Road
Portland, ME 04103

focuses on the immediate steps that need to be taken to recover functional operations within short duration events (less than 24 hours) and well as long term plans to maintain functionality during an extended event (up to, or greater than 72 hours).

IT Recovery Plan

Like most operations, FairPoint is dependent on an IT infrastructure to conduct business and serve customers. Because of its importance, FairPoint has a continuity plan established specifically for IT operations. The IT continuity plan addresses security and access control of data sites, onsite / offsite data backup methods, processes for sequencing of system(s) recoveries and ultimately the use and execution of our established Disaster Recovery Site located outside the FairPoint footprint.

Plan Maintenance and Exercising

The BCP is a so called "living" document. Updates to the plan are ongoing with changes incorporated annually at a minimum. Individual plan components are reviewed with oversight from FairPoint's Risk Management Team. In 2013, FairPoint began the process of migrating the BCP onto a cloud based solution which will allow access to the plan components from any computer, smartphone and tablet.

FCC FORM 481

Line 1010 – Voice Service Rate Comparability

The pricing of the company's voice service rate is no more than two standard deviations above the applicable national average urban rate for voice service, as specified in the most recent public notice, FCC DA15-470 released on April 16, 2015.

For Rates See Attachment: (700) Company Price Offerings (voice)

Form 481 Line 1210- Terms & Conditions for Lifeline Customers

China Telephone Company provides a Lifeline Program discount for residence service for eligible low income customers. The Lifeline Program discount is applied to any month to month residence local service, package or bundle offering. The discount is intended to offset the Subscriber Line Charge and local line charge, although eligible packages and bundles may have toll calling included in the pricing for the offering.

The Catalog pages outlining the terms of the Lifeline Program in the China Telephone Company are attached. The terms and conditions of residential basic local exchange service, package and bundle offerings can be found at <http://www.tariffs.net/fairpoint/tier.asp?cid=1644>.

CHINA TELEPHONE COMPANY
MAINE TELEPHONE COMPANY
NORTHLAND TELEPHONE COMPANY OF MAINE INC.
SIDNEY TELEPHONE COMPANY
STANDISH TELEPHONE COMPANY
D/B/A FAIRPOINT COMMUNICATIONS

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LOCAL EXCHANGE SERVICE

CHINA TELEPHONE COMPANY, MAINE TELEPHONE COMPANY, NORTHLAND
TELEPHONE COMPANY OF MAINE, SIDNEY TELEPHONE COMPANY, STANDISH
TELEPHONE COMPANY

GENERAL SYSTEMS AND SERVICES (Cont'd)

LIFELINE PROGRAM

- (1) The Company shall provide Lifeline service as defined in 47 C.F.R § 54.401 (a) on a non-discriminatory basis to all qualifying low-income customers. The Company's Lifeline service offering shall comply with all applicable federal and state laws, including, but not limited to 47 C.F.R. Part 54, Subpart E; the FCC's Lifeline reform order (Report and Order released February 6, 2012, WC Docket No. 11-42, et.al) and any subsequent clarifying orders.

(N)

(N)

CHINA TELEPHONE COMPANY
MAINE TELEPHONE COMPANY
NORTHLAND TELEPHONE COMPANY OF MAINE, INC.
SIDNEY TELEPHONE COMPANY
STANDISH TELEPHONE COMPANY
D/B/A FAIRPOINT COMMUNICATIONS

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GENERAL SERVICES

(N)

P. SCREENED ONE PARTY SERVICE (Cont'd)

4. TOLL RESTRICTION SERVICE (Cont'd)

b. Rates and Charges

1. The following rates and charges are in addition to all other applicable rates and charges.

| | <u>Non Recurring Charge</u> | <u>Monthly Charge</u> |
|----------------------------------|-----------------------------|-----------------------|
| Per central office line equipped | * | \$5.00 |

*Appropriate Section Service Charges apply.

2. Regulations regarding connection of terminal equipment as shown in Section 7 apply.
3. If a Customer has a scheduled payment arrangement which is agreed to by both the Company and the Customer to collect a past due balance, the Company may at its discretion waive the service charges and monthly rates when the service is added as a means of controlling the Customers bill.
4. For any Customer that qualifies under the Lifeline Assistance Program the Company will waive the service charge and monthly rates for Toll Restriction Service.

c. Payment Arrangement Provisions

1. When a Customer's local serving office is suitably equipped to provide screened billing the company may waive a Customer's payment of the service charges and monthly rates when the feature is added as a means of controlling a Customer's bill. If a Customer fails to complete a payment arrangement that has been renegotiated at least once the company may require screened billing as a condition to negotiations for the third or subsequent arrangement. The screened billing will remain on the line until the arrangement is completed

(N)

RATE FLOOR DATA COLLECTION - OMB Control Number 3060-0986

Block 1 - Contact Information

| ROW # | DATA ELEMENT | FORMAT OF REQUESTED DATA | RESPONSE |
|-------|---|--------------------------|---------------------|
| 1 | Carrier Study Area Code | 6 numeric digits | 100004 |
| 2 | Carrier Study Area Name | alpha characters | China Telephone Co. |
| 3 | Service Provider Identification Number | 9 numeric digits | 143001270 |
| 4 | Residential Local Service Charge Effective Date | mm/dd/yyyy | 6/1/2015 |
| 5 | Contact Name | alpha characters | Barbara Galardo |
| 6 | Contact Telephone Number (include area code) | 9 numeric digits | 2075354126 |
| 7 | Sheet number | numeric digit(s) | 1 |
| 8 | Total Number of Sheets | numeric digit(s) | 1 |

Block 2 - Residential Local Service Rates, Fees, and Line Counts

| | Column 1 Residential Local Service Charge | Column 2 State Subscriber Line Charge | Column 3 State Universal Service Fee | Column 4 Mandatory Extended Area Service Charge | Column 5 Loops |
|----|---|---|--|--|-------------------|
| 9 | \$ 17.58 | | | | |
| 10 | \$ 19.08 | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |
| 14 | | | | | |
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| 33 | | | | | |
| 34 | | | | | |

REDACTED FOR PUBLIC INSPECTION

Rate Floor

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier See Attached Listing

Signature of authorized officer

M. Michael T. Skrivan

Date

June 23, 2015

Printed name of authorized officer Michael T. Skrivan

Title or position of authorized officer Vice President of Regulatory

Telephone number of authorized officer: (207) 535 - 4150

Study Area Code of Reporting Carrier

See Attached List

Filing Due Date for this form
(mm/dd/yyyy)

7/1/2015

| | |
|--|------------------------|
| <010> Study Area Code | 150078 |
| <015> Study Area Name | CHAUTAUQUA & ERIE |
| <020> Program Year | 2016 |
| <030> Contact Name: Person USAC should contact with questions about this data | Barbara Galardo |
| <035> Contact Telephone Number: Number of the person identified in data line <030> | 2075354126 ext. |
| <039> Contact Email Address: Email of the person identified in data line <030> | bgalardo@fairpoint.com |

Accepted / Filed

JUN 30 2015

Federal Communications Commission
Office of the Secretary

ANNUAL REPORTING FOR ALL CARRIERS

| | |
|------------|------------|
| 54.313 | 54.422 |
| Completion | Completion |
| Required | Required |

(check box when complete)

| | | | |
|--|---|-------------------------------------|-------------------------------------|
| <100> Service Quality Improvement Reporting | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <200> Outage Reporting (voice) | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <210> <input type="checkbox"/> <-- check box if no outages to report | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <300> Unfulfilled Service Requests (voice) | | <input type="checkbox"/> | <input type="checkbox"/> |
| <310> Detail on Attempts (voice) | (attach descriptive document) | <input type="checkbox"/> | <input type="checkbox"/> |
| <320> Unfulfilled Service Requests (broadband) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <330> Detail on Attempts (broadband) | (attach descriptive document) | <input type="checkbox"/> | <input type="checkbox"/> |
| <400> Number of Complaints per 1,000 customers (voice) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <410> Fixed | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <420> Mobile | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <430> Number of Complaints per 1,000 customers (broadband) | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <440> Fixed | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <450> Mobile | | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <500> Service Quality Standards & Consumer Protection Rules Compliance | (check to indicate certification) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <510> 150078NY510.pdf | (attach descriptive document) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <600> Functionality in Emergency Situations | (check to indicate certification) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <610> 150078NY610.pdf | (attach descriptive document) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <700> Company Price Offerings (voice) | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <710> Company Price Offerings (broadband) | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <800> Operating Companies and Affiliates | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <900> Tribal Land Offerings (Y/N)? | (if yes, complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <1000> Voice Services Rate Comparability Certification | Yes | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <1010> 1010 Voice Service Rate Comparability.pdf | (attach descriptive document) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <1100> Certify whether terrestrial backhaul options exist (Yes or No) | (if not, check to indicate certification) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <1110> | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <1200> Terms and Condition for Lifeline Customers | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

| | | | |
|--|-----------------------------------|-------------------------------------|-------------------------------------|
| <2000> | (check to indicate certification) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <2005> | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet | | | |
| <3000> | (check to indicate certification) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| <3005> | (complete attached worksheet) | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

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**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

| | | |
|-------|---|---|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |
| <110> | Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? | (yes / no) <input type="radio"/> <input checked="" type="radio"/> |
| <111> | | (yes / no) <input type="radio"/> <input type="radio"/> |

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

112 Service Quality Improvement Reporting 2015.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

| | | |
|-------|--|----------------|
| <113> | Maps detailing progress towards meeting plan targets | Not Applicable |
| <114> | Report how much universal service (USF) support was received | Not Applicable |
| <115> | How much (USF) was used to improve service quality and how support was used to improve service quality | Not Applicable |
| <116> | How much (USF) was used to improve service coverage and how support was used to improve service coverage | Not Applicable |
| <117> | How much (USF) was used to improve service capacity and how support was used to improve service capacity | Not Applicable |
| <118> | Provide an explanation of network improvement targets not met in the prior calendar year. | Not Applicable |

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(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| | | |
|-------|-----------------|--------|
| <010> | Study Area Code | 150078 |
|-------|-----------------|--------|

| | | |
|-------|-----------------|-------------------|
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
|-------|-----------------|-------------------|

| | | |
|-------|--------------|------|
| <020> | Program Year | 2016 |
|-------|--------------|------|

| | | |
|-------|---|-----------------|
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
|-------|---|-----------------|

<035> Contact Telephone Number - Number of person identified in data line <030> 2075354126 ext.

<039> Contact Email Address - Email Address of person identified in data line <030> bgalardo@fairpoint.com

| | | | | | | | | | | | | |
|-------|-----|------|------|------|------|------|------|-----|-----|-----|-----|-----|
| <220> | <a> | <b1> | <b2> | <b3> | <b4> | <c1> | <c2> | <d> | <e> | <f> | <g> | <h> |
|-------|-----|------|------|------|------|------|------|-----|-----|-----|-----|-----|

[illegible]

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(700) Price Offerings Including Voice Rate Data
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| | | |
|-------|---|------------------------|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

<701> Residential Local Service Charge Effective Date
<702> Single State-wide Residential Local Service Charge

1/1/2015

<703>

[illegible]

REDACTED FOR PUBLIC INSPECTION

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| | | |
|-------|---|------------------------|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

[illegible]

REDACTED FOR PUBLIC INSPECTION

(800) Operating Companies
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

| | | |
|-------|---|---|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |
| <810> | Reporting Carrier | Chautauqua and Erie Telephone Corporation |
| <811> | Holding Company | FairPoint Communications, Inc. |
| <812> | Operating Company | Chautauqua and Erie Telephone Corporation |

[illegible]

[illegible]

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

| | | |
|-------|---|------------------------|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2013

| | |
|---|------------------------|
| <010> Study Area Code | 150078 |
| <015> Study Area Name | CHAUTAUQUA & ERIE |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

150078NY1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP www.tariffs.net/fairpoint/tier.asp?cid+1644

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- <1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☒
- <1222> Details on the number of minutes provided as part of the plan, ☒
- <1223> Additional charges for toll calls, and rates for each such plan. ☒

(2000) Price Cap Carrier Additional Documentation

Data Collection Form

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

| | | |
|-------|---|-----------------------|
| <010> | Study Area Code | |
| <015> | Study Area Name | 150078 |
| <020> | Program Year | CHAUTAUQUA & ERIE |
| <030> | Contact Name - Person USAC should contact regarding this data | 2016 |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | Barbara Galardo |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | 2075354126 ext. |
| | | bgalardo@airpoint.com |

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

- <2010> 2nd Year Certification {47 CFR § 54.313(b)(1)i}
- <2011a> 3rd Year Certification {47 CFR § 54.313(b)(1)ii}
- <2011b> Attachment {47 CFR § 54.313(b)(1)iii}

Not Applicable

Name of Attached Document(s) Listing Required Information

Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

- <2012> 2013 Frozen Support Calculation {47 CFR § 54.313(c)(1)}
- <2013> 2014 Frozen Support Calculation {47 CFR § 54.313(c)(2)}
- <2014> 2015 Frozen Support Calculation {47 CFR § 54.313(c)(3)}
- <2015> 2016 and future Frozen Support Calculation {47 CFR § 54.313(c)(4)}

Yes

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

- <2016> Certification Support Used to Build Broadband

Not Applicable

Connect America Phase II Reporting {47 CFR § 54.313(e)}

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document(s) Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010> Study Area Code 150078
 <015> Study Area Name CHAUTAUQUA & ERIE
 <020> Program Year 2016
 <030> Contact Name - Person USAC should contact regarding this data Barbara Galardo
 <035> Contact Telephone Number - Number of person identified in data line <030> 2075354126 ext.
 <039> Contact Email Address - Email Address of person identified in data line <030> bgalardo@fairpoint.com

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010) Progress Report on 5 Year Plan
 Milestone Certification (47 CFR § 54.313(f)(1)(i))

[Redacted Box]

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

☐

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

[Redacted Box]

Name of Attached Document Listing Required Information

(3013) Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))

(Yes/No)

☒ ☒

(3014) If yes, does your company file the RUS annual report

(Yes/No)

☒ ☒

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

☐

(3016) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

[Redacted Box]

Name of Attached Document Listing Required Information

(3018) If the response is no on line 3014, Is your company audited?

(Yes/No)

☒ ☒

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains

(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

☐

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3021) Management letter and audit opinion issued by the independent certified public accountant that performed the company's financial audit

☐

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022) Copy of their financial statement which has been subject to review by an independent certified public accountant; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,

☐

(3023) Underlying information subjected to a review by an independent certified public accountant

☐

(3024) Underlying information subjected to an officer certification.

☐

(3025) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3026) Attach the worksheet listing required information

[Redacted Box]

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation (Continued)

FCC Form 481

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

| | |
|---|------------------------|
| <010> Study Area Code | 150078 |
| <015> Study Area Name | CHAUTAUQUA & ERIE |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends

REDACTED FOR PUBLIC INSPECTION

| | |
|---|--|
| Certification - Reporting Carrier Data Collection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|---|--|

| | |
|---|------------------------|
| <010> Study Area Code | 150078 |
| <015> Study Area Name | CHAUTAUQUA & ERIE |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

| | |
|---|---|
| Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients | |
| I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. | |
| Name of Reporting Carrier: CHAUTAUQUA & ERIE | |
| Signature of Authorized Officer: CERTIFIED ONLINE | Date 06/23/2015 |
| Printed name of Authorized Officer: Mike Skrivan | |
| Title or position of Authorized Officer: Vice President Regulatory | |
| Telephone number of Authorized Officer: 2075354150 ext. | |
| Study Area Code of Reporting Carrier: 150078 | Filing Due Date for this form: 07/01/2015 |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | |

| | |
|---|--|
| Certification - Agent / Carrier Data Collection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|---|--|

| | |
|---|------------------------|
| <010> Study Area Code | 150078 |
| <015> Study Area Name | CHAUTAUQUA & ERIE |
| <020> Program Year | 2016 |
| <030> Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier | |
|--|--------------------------------------|
| I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. | |
| Name of Authorized Agent: _____ | |
| Name of Reporting Carrier: _____ | |
| Signature of Authorized Officer: _____ | Date: _____ |
| Printed name of Authorized Officer: _____ | |
| Title or position of Authorized Officer: _____ | |
| Telephone number of Authorized Officer: _____ | |
| Study Area Code of Reporting Carrier: _____ | Filing Due Date for this form: _____ |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier | |
|--|--------------------------------------|
| I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate. | |
| Name of Reporting Carrier: _____ | |
| Name of Authorized Agent or Employee of Agent: _____ | |
| Signature of Authorized Agent or Employee of Agent: _____ | Date: _____ |
| Printed name of Authorized Agent or Employee of Agent: _____ | |
| Title or position of Authorized Agent or Employee of Agent: _____ | |
| Telephone number of Authorized Agent or Employee of Agent: _____ | |
| Study Area Code of Reporting Carrier: _____ | Filing Due Date for this form: _____ |
| Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001. | |

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Attachments

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(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 150078
<015> Study Area Name CHAUTAUQUA & ERIE
<020> Program Year 2016
<030> Contact Name - Person USAC should contact regarding this data Barbara Galardo
<035> Contact Telephone Number - Number of person identified in data line <030> 2075354126 ext.
<039> Contact Email Address - Email Address of person identified in data line <030> bgalardo@fairpoint.com

<701> Residential Local Service Charge Effective Date
<702> Single State-wide Residential Local Service Charge

1/1/2015

<703>

| <a1> | <a2> | <a3> | <b1> | <b2> | <b3> | <b4> | <b5> | <c> |
|-------|-----------------|------------|-----------|--------------------------------|------------------------------|-----------------------------|--|-------------------------------|
| State | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fees |
| NY | Brocton | | FR | 13.1 | | | | |
| NY | Brocton | | FR | 13.1 | | | | |
| NY | Brocton | | FR | 13.1 | | | | |
| NY | Brocton | | FR | 13.1 | | | | |
| NY | Brocton | | FR | 13.1 | | | | |
| NY | Findley Lake | | FR | 13.1 | | | | |
| NY | Findley Lake | | FR | 13.1 | | | | |
| NY | Findley Lake | | FR | 13.1 | | | | |
| NY | Findley Lake | | FR | 13.1 | | | | |
| NY | Findley Lake | | FR | 13.1 | | | | |
| NY | Ripley | | FR | 13.1 | | | | |
| NY | Ripley | | FR | 13.1 | | | | |
| NY | Ripley | | FR | 13.1 | | | | |
| NY | Ripley | | FR | 13.1 | | | | |
| NY | Ripley | | FR | 13.1 | | | | |
| NY | Mayville | | FR | 13.1 | | | | |
| NY | Mayville | | FR | 13.1 | | | | |
| NY | Mayville | | FR | 13.1 | | | | |
| NY | Mayville | | FR | 13.1 | | | | |
| NY | Westfield | | FR | 13.1 | | | | |

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(700) Price Offerings Including Voice Rate Data
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code 150078

| | | |
|-------|-----------------|-------------------|
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
|-------|-----------------|-------------------|

| | | |
|-------|--------------|------|
| <020> | Program Year | 2016 |
|-------|--------------|------|

| | | |
|-------|---|-----------------|
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
|-------|---|-----------------|

| | | |
|-------|---|-----------------|
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
|-------|---|-----------------|

| | | |
|-------|---|------------------------|
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |
|-------|---|------------------------|

1/1/2015

<702> Single State-wide Residential Local Service Charge

<703>

[illegible]

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(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| | | |
|-------|---|------------------------|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |

| <a1> | <a2> | <b1> | <b2> | <c> | <d1> | <d2> | <d3> | <d4> |
|-------|-----------------|------------------|----------------------|-----|---|---|----------------------|--|
| State | Exchange (ILEC) | Residential Rate | State Regulated Fees | | Broadband Service - Download Speed (Mbps) | Broadband Service - Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached {select} |
| | | | | | | | | |

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(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| | | |
|-------|---|---|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |
| <810> | Reporting Carrier | Chautauqua and Erie Telephone Corporation |
| <811> | Holding Company | FairPoint Communications, Inc. |
| <812> | Operating Company | Chautauqua and Erie Telephone Corporation |

| <813> | <a1> | <a2> | <a3> |
|-------|---|--------|--|
| | Affiliates | SAC | Doing Business As Company or Brand Designation |
| | Bentleyville Communications Corporation | 170145 | dba FairPoint Communications Inc. |
| | Berkshire Cable Corp. | | dba FairPoint Long Distance |
| | Berkshire Cellular, Inc. | | |
| | Berkshire New York Access, Inc. | | |
| | Berkshire Telephone Corporation | 150073 | dba FairPoint Communications Inc. |
| | Big Sandy Telecom, Inc. | 462192 | dba FairPoint Communications Inc. |
| | Bluestem Telephone Company | 411835 | dba FairPoint Communications Inc. |
| | Chautauqua & Erie Communications, Ltd | | |
| | Chautauqua & Erie Communications, Inc. | | dba FairPoint Long Distance |
| | Chautauqua and Erie Telephone Corporation | 150078 | dba FairPoint Communications Inc. |
| | China Telephone Company | 100004 | dba FairPoint Communications Inc. |
| | Chouteau Telephone Company | 431981 | dba FairPoint Communications Inc. |
| | Columbine Telecom Company | 462204 | dba FairPoint Communications Inc. |
| | Columbus Grove Telephone Co. | 300604 | dba FairPoint Communications Inc. |
| | COM Networks, Inc. | | |
| | Comerco, Inc. | | dba FairPoint Long Distance |
| | Community Service Telephone Co | 100015 | dba FairPoint Communications Inc. |
| | C-R Communications, Inc. | | |
| | C-R Long Distance, Inc. | | dba FairPoint Long Distance |
| | C-R Telephone Company | 341009 | dba FairPoint Communications Inc. |
| | El Paso Long Distance Company | | dba FairPoint Long Distance |
| | El Paso Telephone Company | 341004 | dba FairPoint Communications Inc. |
| | Ellensburg Telephone Company | 522412 | dba FairPoint Communications Inc. |

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(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

| | | |
|-------|---|---|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
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| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |
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| <811> | Holding Company | FairPoint Communications, Inc. |
| <812> | Operating Company | Chautauqua and Erie Telephone Corporation |

| <813> | <a1> | <a2> | <a3> |
|-------|--|--------|--|
| | Affiliates | SAC | Doing Business As Company or Brand Designation |
| | Elitel Long Distance Corp. | | dba FairPoint Long Distance |
| | Enhanced Communications of Northern New England Inc. | | |
| | ExOp of Missouri Inc. | | |
| | FairPoint Broadband, Inc. | | |
| | FairPoint Business Services LLC | | |
| | FairPoint Carrier Services, Inc. | | |
| | FairPoint Communications Missouri, Inc. | 421472 | dba FairPoint Communications Inc. |
| | FairPoint Logistics, Inc. (f/k/a MJD Capital Corp.) | | |
| | FairPoint Vermont, Inc. (TG) | 143331 | dba FairPoint Communications Inc. |
| | Germantown Independent Telephone Company | 300618 | dba FairPoint Communications Inc. |
| | Germantown Long Distance Company | | dba FairPoint Long Distance |
| | GTC, Inc. | 210291 | (Floral) dba FairPoint Communications Inc. |
| | GTC, Inc. | 210329 | (Perry) dba FairPoint Communications Inc. |
| | Maine Telephone Company, INC | 100025 | dba FairPoint Communications Inc. |
| | Marianna Scenery Hill Telephone Company | 170185 | dba FairPoint Communications Inc. |
| | Marianna Tel., Inc. | | |
| | MJD Services Corp. | | |
| | MJD Ventures, Inc. | | |
| | Northern New England Telephone Operations LLC (NNE) | 125113 | dba FairPoint Communications Inc. |
| | Northern New England Telephone Operations LLC (NNE) | 105111 | dba FairPoint Communications Inc. |
| | Northland Telephone Company of Maine, Inc. | 103313 | dba FairPoint Communications Inc. |
| | Odin Telephone Exchange, Inc | 341065 | dba FairPoint Communications Inc. |
| | Orwell Communications, Inc. | | dba FairPoint Long Distance |

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(800) Operating Companies
Data Collection Form

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| | | |
|-------|---|---|
| <010> | Study Area Code | 150078 |
| <015> | Study Area Name | CHAUTAUQUA & ERIE |
| <020> | Program Year | 2016 |
| <030> | Contact Name - Person USAC should contact regarding this data | Barbara Galardo |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 2075354126 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | bgalardo@fairpoint.com |
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| <812> | Operating Company | Chautauqua and Erie Telephone Corporation |

| <813> | <a1> | <a2> | <a3> |
|-------|--|--------|--|
| | Affiliates | SAC | Doing Business As Company or Brand Designation |
| | Orwell Telephone Company | 300649 | dba FairPoint Communications Inc. |
| | Peoples Mutual Long Distance | | |
| | Peoples Mutual Telephone Co | 190244 | dba FairPoint Communications Inc. |
| | Quality One Technologies, Inc. | | dba FairPoint Long Distance |
| | Ravenswood Communications, Inc. | | |
| | Sidney Telephone Company | 103313 | dba FairPoint Communications Inc. |
| | ST Enterprises, Ltd. | | |
| | ST Long Distance, Inc. | | dba FairPoint Long Distance (Kansas, Colorado, Oklahoma) |
| | St. Joe Communications, Inc. | 210339 | dba FairPoint Communications Inc. |
| | Standish Telephone Company, INC | 100025 | dba FairPoint Communications Inc. |
| | Sunflower Telephone Co | 461835 | dba FairPoint Communications Inc. |
| | Taconic Technology Corp. | | |
| | Taconic TelCom Corp. | | dba FairPoint Long Distance |
| | Taconic Telephone Corp. | 150084 | dba FairPoint Communications Inc. |
| | Telephone Operating Company of Vermont LLC (NNE) | 145115 | dba FairPoint Communications Inc. |
| | UI Long Distance, Inc. | | dba FairPoint Long Distance |
| | Utilities, Inc. | | dba FairPoint Communications Inc. |
| | YCOM Networks, Inc. | 522453 | dba FairPoint Communications Inc. |
| | | | |
| | | | |
| | | | |
| | | | |

FCC Form 481

Line 112- Service Quality Improvement Reporting
{47 CFR 54.313(a)(1)}

1. In the FCC's Public Notice DA 14-951, released May 1, 2014, the FCC waived the requirement for price cap ETCs to file a five-year plan. The bureau stated that "until the [Connect America Phase II forward-looking] cost model is adopted and incumbents have the opportunity to accept a state-level commitment, it does not serve the public interest" to require price cap ETCs to file five-year plans.¹

¹ *Connect America Fund et al.* WC Docket No. 10-90 et al., Order, 28 FCC Rcd 2051, 2054, para. 8 (Wireline Comp. Bur. 2013) (*ETC Reporting Requirements Order*).

Chautauqua & Erie Telephone Corp
New York
150078

Line 510: Service Quality Reporting/Consumer Protection Rules Compliance

Chautauqua & Erie Telephone Corp., hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company complies with service quality and consumer protection provisions under state law. These provisions include, but are not limited to, the following: (1) filing a Local Exchange Tariff pursuant to the requirements of The New York Public Service Commission which discloses rates, terms and conditions of service to customers; (2) compliance with state consumer protection provisions relating to Customer Services as identified in the Code of State Regulations, compliance with provisions for Quality of Service as identified in the Code of State Regulations, compliance with Service Objectives as identified in the Code of State Regulations, compliance with customer Inquiry procedure as identified in the Code of State Regulations, compliance with Dispute standards as identified in the Code of State Regulations; (3) compliance with truth-in-billing requirements; and (4) compliance with Federal CPNI rules, Red Flag Rules and other applicable federal and state requirements governing the protection of customers' privacy.

In establishing this certification in its *2005 ETC Order*,¹ the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers."² The Commission found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement and that the sufficiency of other commitments would be considered on a case-by-case basis. In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."³

Berkshire Telephone Corporation d/b/a FairPoint Communications, Chautauqua & Erie Telephone Corporation d/b/a FairPoint Communications, and Taconic Telephone Corporation d/b/a FairPoint Communications, are all under Service Quality Reporting under 603.4 (Reporting Requirements). The rule states that Service Providers with 500,000 or fewer access lines in service shall only report on Customer Trouble Report Rate. Each of the above New York companies report monthly on the Customer Trouble Report Rate (CTRR). The rule goes on to state that for Customer Trouble Report Rate, a service provider shall automatically submit to the Commission staff a Service Inquiry Report whenever an individual central office entity experiences 5.5 reports per 100 lines or greater for the current month and any two of the previous four months. The FairPoint New York Companies are below the report rate, and therefore, no Service Inquiry Reports are necessary.

If a customer has a concern about their FairPoint Communications' service or billing, he/she can contact repair service, technical support or customer service with information found on their statement. Customers may also contact agencies, through information posted in the phone directory, website, and tariff pages. All consumer complaints whether from Attorney Generals' offices, Public Utility Commissions, Better Business Bureaus, Federal Communications Commission and all other agencies are sent to the FairPoint Communications' Maine office via U.S. Mail or by electronic mail at consumer@fairpoint.com. The complaints are directed to the appropriate responsible Company Team member within FairPoint Communications for resolution and response to the customer.

¹ *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("2005 ETC Order").

² *Id.* at para. 28.



FairPoint Communications
1 Davis Farm Road
Portland, ME 04103

Business Continuity Plan Overview

Introduction

FairPoint Communications, Inc. ("FairPoint") is committed to maintaining a vigilant state of disaster preparedness for the interests of our customers, stockholders, employees and other critical stakeholders.

The purpose of our Business Continuity Plan ("BCP") is to define the disaster preparedness and recovery protocols and procedures required to restore FairPoint's critical business support functions, inside and outside plant systems and operations within FairPoint's operating footprint.

BCP components detail FairPoint's procedures for preparing for and responding to an emergency situation affecting our ability to deliver core services to our customers and our ability to meet legal dictates, and regulatory requirements.

This document discusses the following:

- BCP Scope
- BCP Components
- Plan Maintenance

BCP Scope

FairPoint's business continuity response planning is concentrated on two critical operational areas:

- Customer Interfacing – It is recognized that a "business impact" only occurs when an external-interfacing element is disrupted. In essence, this means that if FairPoint experiences a disruptive event, but one that does not breach the outer-shell of the FairPoint operation and interrupt critical customer services, customer product or other external end-user, then it does not have a business impact, as defined by the BCP
- Infrastructure Integrity – Without critical infrastructure systems, the ability for all other FairPoint business operations (back / front office) can come to a halt. It is these infrastructure systems that provide the critical human-factor of our customer-interfacing services. Critical infrastructure would address such services / systems as, building space for staff and equipment, service utilities, telecommunications and data network, IT network, and related infrastructure based items.

The BCP has been developed to assure the continuity of critical customer interfacing services and systems should a physical incident or workforce disruption event occur, which affects:

- Information Technology ("IT")
- Administrative and Support Operations
- Inside and Outside Plant Operations
- Network Operations Center ("NOC")
- Enhanced 9-1-1 ("E-911")
- Dispatch
- Repair Center

FairPoint has developed response / recovery strategies addressing physically disruptive incidents and workforce related disruptive incidents. All response strategies are based on recovery time objectives of those department functions and critical infrastructure systems essential to sustain customer interfacing services.



FairPoint Communications
1 Davis Farm Road
Portland, ME 04103

BCP Components

The BCP consists of several components:

- Operational Preparedness for Expected Events (i.e. weather related events)
- Event / Crisis Communication Plan
- Redundancy Mapping
- Department Recovery Plans
- Information Technology Continuity Plan

The following is a brief summary of the plan components.

Operational Preparedness for Expected Events

Weather events such as snow, ice and wind can negatively impact power and communications infrastructure. While this threat cannot be eliminated, FairPoint takes steps to mitigate a storm's impact through preparedness and response. Steps include:

- Pre-event planning based on information provided by National Oceanic and Atmospheric Administration ("NOAA")
- Coordinate planning and recovery efforts through state emergency management groups
- Engage supply chain vendors to deliver additional stock prior to the expected event
- Inspect, test and fuel emergency generators in anticipation of a power outage
- Reallocate / relocate staff in order to respond to the pending event

Event / Crisis Communication Plan

Communications is a key element to respond and recover business operations. Event / Crisis Communications are facilitated by FairPoint's Risk Management Team who assume the role of incident command from the onset of the event until normal operations are resumed.

FairPoint uses a dual level communication strategy as part of the Event Communication Plan. The primary level is the workgroup comprised of both employees and vendors that are directly involved in the recovery work. The secondary level consists of internal interested parties made up of our Strategic Leadership Team. The role of the secondary level is to facilitate communications both internally and externally regarding the event and our path to response and recovery. For 2014, FairPoint has partnered with SunGard and will be deploying a hosted event communication platform in order to increase our speed and reach of communications during an event.

Redundancy Mapping

The process of redundancy mapping reviews operations within the FairPoint organization to identify alternate facilities and work locations that can be used in the event a primary location is not accessible. Given the geographic spread of FairPoint's Northern New England footprint, capabilities exist to relocate operations from event impacted areas. Through the mapping process, FairPoint is able to identify single points of failure and develop alternative work processes.

Department Recovery Plans

Each department has developed a recovery plan based on its critical operations as they pertain to the deliverables they contribute to our customers. FairPoint has triaged the recovery efforts based on the concept of customer servicing impact. Federal and State regulatory requirements, along with E-911 needs, have a high level of consideration in addition to the business impact concerns. The BCP goal is to minimize the disruption duration as much as is practical and provide a level of risk mitigation that will maintain critical operations. The recovery plans are built around a 24-hour to 72-hour response plan. This methodology